

MAR 21 2006

BRINKLEY, MCNERNEY, MORGAN, SOLOMON & TATUM, LLP
Attorneys at Law
200 East Las Olas Boulevard
Suite 1900
Fort Lauderdale, FL 33301

Telephone 954-522-2200
Facsimile 954-522-9123

FACSIMILE TRANSMISSION COVER SHEET**PLEASE DELIVER TO:**

NAME: Examiner Steven M. Marsh/Art Unit 3632


FAX TELEPHONE NO. 571.273.8300

MESSAGE SENT BY: Daniel C. Crilly, Esq.

DATE: March 21, 2006

PAGES: (including cover).....14

MESSAGE: Please see attached Transmittal Form (1 page); Fee Transmittal (1 page) and Amendment under 37 C.F.R. § 1.111 (11 pages) in connection with U.S. Appl. Serial No. 10/644,280. Thank you.

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PTO/SB/21 (09-04)

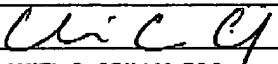
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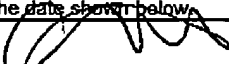
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/644,280	
	Filing Date	August 20, 2003	
	First Named Inventor	Howard Sinkoff	
	Art Unit	3632	
	Examiner Name	Steven M. Marsh	
Total Number of Pages in This Submission		14	
		Attorney Docket Number	7647-03468

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (<i>Appeal Notice, Brief, Reply Brief</i>) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	BRINKLEY, MCNERNEY, MORGAN, SOLOMON & TATUM, LLP		
Signature			
Printed Name	DANIEL C. CRILLY, ESQ.		
Date	March 21, 2006	Reg. No.	38,417

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature			
Typed or printed name	Chriselide Mendez	Date	March 21, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		Complete If Known Application Number 10/644,280 Filing Date August 20, 2003 First Named Inventor Howard Sinkoff Examiner Name Steven M. Marsh Art Unit 3632 Attorney Docket No. 7647-03468	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 0			

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input type="checkbox"/> Deposit Account Deposit Account Number: 50-1111 Deposit Account Name: _____ For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description	Fee (\$)	Small Entity Fee (\$)					
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25					
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100					
Multiple dependent claims	360	180					
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	
- 20 or HP = _____ x _____ = _____							
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
- 3 or HP = _____ x _____ = _____							
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Claims	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other: _____							0

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent) 38.417	Telephone (954) 522-2200
Name (Print/Type) Daniel G. Crilly, Esq.		Date 03/21/2006

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAR 21 2006

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Date: March 21, 2006

Application Serial No.:	10/644,280	Confirmation No.:	7474
Applicant	:	Howard Sinkoff	
Filed	:	08/20/2003	
Title	:	NOVEL CABLE TRAY ASSEMBLIES	
TC/A.U.	:	3632	
Examiner	:	Steven M. Marsh	
Docket No.	:	7647-03468	

Mail Stop Amendment
Commissioner for Patents
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AMENDMENT AND RESPONSE UNDER 37 C.F.R. § 1.111

Sir:

Responsive to the Office Action dated December 23, 2005 as entered in the above-captioned matter, Applicant hereby respectfully submits the following amendment and response, without prejudice or disclaimer.

Amendments to the Claims are reflected in the listing of claims that begins on page 2 of this paper.

Remarks/Arguments begin on page 9 of this paper.